Application or Docket Number

Effective January 1, 2003  (0675535)												<u> </u>											
CLAIMS AS FILED - PART I SMALL ENTITY (Column 1) (Column 2) TYPE											OTHER SMALL												
TOTAL CLAIMS 70						A	RATE			RATE	F	ΕE											
FOR			NUMBER FILED		NUMBER EXTRA		BAS	ic fee	375.00	OR	Basic Fee	750	0.00										
TOTAL CHARGEABLE CLAIMS			70 minus 20=		. 0		X	\$ 9=		OR	OR X\$18=		7										
INDEPENDENT CLAIMS			ninus 3 =		10		×	X42=		OR	Y94-												
MULTIPLE DEPENDENT CLAIM PRESENT								40		-		1											
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=		OR	+280=	Jui	_										
								TOTAL		OR	TOTAL 750												
(Column 1) (Column 2) (Column 3)							SI	AALL	ENTITY	OR	SMALL												
ENT A		CLAIMS REMAINING AFTER AMENDMENT	HIGHI NUME PREVIO PAID I		EST BER SUSLY	PRESENT EXTRA		ATE	ADDI- TIONAL FEE		RATE	TIO	DDI- NAL EE										
AMENDMENT	Total	. 19	Minus	3	Ć	<u>- D</u>	· x	\$ 9=		OR	X\$18≠												
AME	Independent			<b></b> 3		=-6	×	42=		OR	X84=												
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=		OR.	+280=	П											
								TOTAL		QЯ	YOTAL ADDIT, FEE	T											
11	16/8	(Column 1)	(Column 2) (Column 3)					11.7 46			, , , , , , , , , , , , , , , , , , , ,												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER	PRESENT EXTRA	A	ATE ·	ADDI- TIONAL FEE		RATE	TIC	DI- INAL EE										
NDW	Total	. 17	Minus	** (	20	= /	] [x	\$ 9=		QЯ	X\$18=												
AME	Independent			Minus +++		C AIM		42=		OR	X84=												
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+280=												
								TOTAL		OR	TOYAL ADDIT: FEE												
(Column 1) (Column 2) (Column 3)																							
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	EST BER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL EE										
NON	Total	•	Minus	**		3	] [x	\$9≃		OR	X\$18=												
AME	Independent			Vinus ***		•	1   ×	42=		OR	X84=												
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						4	40=		OR	+280=	Γ											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL			TOTAL	$\vdash$											
***	If the "Highest No	imber Previously P	aid For IN TH	IS SPACE	is less tha	in 3. enter "3."		T. FEE		OR	ADDIT. FEE	<u> </u>											
<u> </u>	The "Highest Nur I PTO-675 (Rev. 1		uid For (Total o								The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  FORM PTO-875, (Rev. 1207)  SIS Government Princip Cities: 2002 — 608-278-68181.  Patent and Trademark Office, U.S. DEPARTMENT OF COMMERC												